#### **Application Data Sheet**

## **Application Information**

Application Type::

Regular

Subject Matter::

Utility

Title::

POST RIP IMAGE RENDERING IN AN

ELECTROGRAPHIC PRINTER

Attorney Docket Number::

10357

Request for Non-Publication?::

No

Total Drawing Sheets::

23

Small Entity::

No

#### **Applicant Information**

Applicant Authority type::

Inventor

Primary Citizenship Country::

US

Status::

**Full Capacity** 

Given Name::

Thomas

Middle Name::

J.

Family Name::

**Foster** 

City of Residence::

Geneseo

State or Province of Residence:: NY

Country of Residence::

US

Street of mailing address::

3247 North Road

City of mailing address::

Geneseo

State or Province of mailing address::

Postal or Zip Code of mailing address:: 14454

Applicant Authority type::

Inventor

Primary Citizenship Country::

US

Status::

**Full Capacity** 

Given Name::

**Philip** 

Middle Name::

A.

Family Name::

Stern

City of Residence::

Rochester

State or Province of Residence:: NY

Country of Residence::

Street of mailing address::

55 Embassy Drive

City of mailing address::

Rochester

State or Province of mailing address::

NY

Postal or Zip Code of mailing address:: 14618

Applicant Authority type::

Inventor

Primary Citizenship Country::

US

Status::

**Full Capacity** 

Given Name::

George

Middle Name::

R.

Family Name::

Walgrove III

City of Residence::

Rochester

State or Province of Residence:: NY

US

Country of Residence::

11 Alta Vista Drive

City of mailing address::

Street of mailing address::

Rochester

State or Province of mailing address::

NY

Postal or Zip Code of mailing address:: 14625

Applicant Authority type::

Inventor

**Primary Citizenship Country::** 

US

Status::

Full Capacity

Given Name::

Gregory

Middle Name::

Family Name::

Rombola

City of Residence::

Spencerport

State or Province of Residence:: NY

Country of Residence::

US

Street of mailing address::

24 Winding Country Lane

City of mailing address::

Spencerport

State or Province of mailing address::

NY

Postal or Zip Code of mailing address:: 14559

Applicant Authority type::

Inventor

Primary Citizenship Country::

US

Status::

**Full Capacity** 

Given Name::

Thomas

Middle Name::

J.

Family Name::

Wetzel

City of Residence::

Rochester

State or Province of Residence:: NY

Country of Residence::

US

Street of mailing address::

67 Northampton Circle

City of mailing address::

Rochester

State or Province of mailing address::

Postal or Zip Code of mailing address:: 14612

Applicant Authority type::

Inventor

Primary Citizenship Country::

US

Full Capacity

Status::

Jeffrey

Given Name:: Middle Name::

C.

Family Name::

Blood

City of Residence::

Webster

State or Province of Residence:: NY

Country of Residence::

US

Street of mailing address::

1435 Fieldcrest Drive

City of mailing address::

Webster

State or Province of mailing address:: NY

Postal or Zip Code of mailing address:: 14580

### **Correspondence Information**

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City of mailing address:: Rochester

State or Province of mailing address:: New York

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Fax:: (585) 512-8065

#### **Representative Information**

Representative Customer Number::	32534	
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## **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	An application claiming the benefit under 35 USC 119(e)	60/459,116	03/31/2003

# **Foreign Priority Information**

Country::	Application Number::	Filing Date::	Priority Claimed::